

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

AUG 17 2005

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OLMS DRDA

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>043-508</u> <u>11532</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Juan</u> <u>@ Campos</u> P.O. Box, Bldg., Room No., if any <u>7th Floor</u> Street <u>1645 W JACKSON</u> City <u>Chicago</u> State <u>Ill</u> ZIP Code + 4 <u>60612</u>	4. Name, file number, and address of labor organization. Name <u>Tenaster Local 705</u> Labor Organization File Number <u>043-508</u> P.O. Box, Building and Room Number, if any <u>7th Floor</u> Street <u>1645 W JACKSON</u> City <u>Chicago</u> State <u>Ill</u> ZIP Code + 4 <u>60612</u>
5. Position in labor organization. <u>Recording Secretary</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Juan Campos

On

7-8-05

Date

312 - 738-2800

Telephone Number

Name of Person Filing

JUAN CANGEZ

File Number U-

0013-508-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

SIERRA Investment

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Suite 1385

Street

2625 Bottom Field

City

OAK Brook

State

IL

ZIP Code + 4

60525

9. Business deals with:

☐

a. Labor Organization

☒

b. Trust

☐

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Teamster Local 705 HNW Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

4th Floor

Street

1645 W. JACKSON

City

Chicago

State

IL

ZIP Code + 4

60612

11.a. Nature of such dealing.

Investment MGR.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

2/24/2004 dinner MK - \$90.00
 6/24/2004 sporting event - \$55.00
 11/13/2004 dinner - \$85.00
 12/1/2004 dinner \$240.00

12.b. Amount.

\$770.00

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

Name of Person Filing

JEAN CUNY

File Number U-

043-508

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Prudential Investment ManagementTrade Name, if any: P.O. Box, Bldg., Room No., if any 14th FloorStreet Three Gateway CenterCity NewarkState New Jersey ZIP Code + 4 07102
4077

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Teamster Local 705 New Kind.Trade Name, if any: P.O. Box, Bldg., Room No., if any 7th FloorStreet 1645 W JacksonCity ChicagoState Ill ZIP Code + 4 60612

11.a. Nature of such dealing.

Introduces firm & personnel11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Divide 96³⁹ 12/1/0412.b. Amount. 96³⁹

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?14.b. Amount of payment.

Name of Person Filing

JUAN Campos

File Number U-

043-508

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Intercontinental Real Estate Corp.Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1270 Soldiers Field Rd.City BostonState Massachusetts ZIP Code + 4 02135

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Tennistas Local 705 H&W FundTrade Name, if any: P.O. Box, Bldg., Room No., if any 7th FloorStreet 1645 W JacksonCity ChicagoState Ill ZIP Code + 4 60612

11.a. Nature of such dealing.

Real estate Investment -

11.b. Approximate dollar value of such dealing.

\$100,000

12.a. Nature of interest held or income received.

2/24/2004 Dinner - MTG. \$90.00
 11/21/2004 Sport Event - \$100.00
 11/26/2004 Dinner - \$85.00
 12/01/2004 Dinner - \$50.00

12.b. Amount.

\$325.00

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐or Consultant ☐

?

14.b. Amount of payment.

Name of Person Filing <u>Juan Cuyas</u>		File Number U- <u>043-508</u>																			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.																					
8. Name and address of Business (including trade name, if any). Name <u>SURENA Investment</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u>Suite 1385</u> Street <u>2625 Bottom Field</u> City <u>OAKBROOK</u> State <u>ILL</u> ZIP Code + 4 <u>60523</u>		9. Business deals with: <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer																			
10. If 9.b. or 9.c. is checked give trust or employer's name. Name <u>Teamster Local 705 HAW Ford</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u>7th floor</u> Street <u>1645 W Jackson</u> City <u>Chicago,</u> State <u>ILL</u> ZIP Code + 4 <u>60612</u>		11.a. Nature of such dealing. <u>Investment TRBL</u> 11.b. Approximate dollar value of such dealing. <u></u> 12.a. Nature of interest held or income received. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">2/24/2004</td> <td style="padding: 2px;">Dinner</td> <td style="padding: 2px;">\$ 90.00</td> </tr> <tr> <td style="padding: 2px;">6/24/2004</td> <td style="padding: 2px;">Sport Event</td> <td style="padding: 2px;">\$ 55.00</td> </tr> <tr> <td style="padding: 2px;">11/13/2004</td> <td style="padding: 2px;">Dinner</td> <td style="padding: 2px;">\$ 85.00</td> </tr> <tr> <td style="padding: 2px;">12/1/2004</td> <td style="padding: 2px;">dinner</td> <td style="padding: 2px;">40.00</td> </tr> <tr> <td style="padding: 2px;">Spring</td> <td style="padding: 2px;">Shirt & Socks</td> <td style="padding: 2px;">\$ 55.50</td> </tr> <tr> <td style="padding: 2px;">Winter</td> <td style="padding: 2px;">wine Bottle & opener</td> <td style="padding: 2px;">91.50</td> </tr> </table> 12.b. Amount. <u>4397.00</u>		2/24/2004	Dinner	\$ 90.00	6/24/2004	Sport Event	\$ 55.00	11/13/2004	Dinner	\$ 85.00	12/1/2004	dinner	40.00	Spring	Shirt & Socks	\$ 55.50	Winter	wine Bottle & opener	91.50
2/24/2004	Dinner	\$ 90.00																			
6/24/2004	Sport Event	\$ 55.00																			
11/13/2004	Dinner	\$ 85.00																			
12/1/2004	dinner	40.00																			
Spring	Shirt & Socks	\$ 55.50																			
Winter	wine Bottle & opener	91.50																			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.																					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name <u></u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>		14.a. Nature of payment. <u></u>																			
13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?		14.b. Amount of payment. <u></u>																			

Name of Person Filing <u>Juan Carlos</u>	File Number U- <u>043-508</u>
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <u>Baum, Sigman, Auerbach Newman</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <u>Suite 2200</u></p> <p>Street <u>200 W Adams</u></p> <p>City <u>Chicago, IL</u></p> <p>State <u>IL</u> ZIP Code + 4 <u>60606</u></p> <p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Teamster Local 705 H&W Fund</u></p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any <u>The Floor</u></p> <p>Street <u>1645 W Jackson</u></p> <p>City <u>Chicago, IL</u></p> <p>State <u>IL</u> ZIP Code + 4 <u>60612</u></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p> <p>11.a. Nature of such dealing.</p> <p style="text-align: center;"><u>Fund Atty</u></p> <p>11.b. Approximate dollar value of such dealing. <u>\$103,752</u></p> <p>12.a. Nature of interest held or income received.</p> <table style="width:100%"><tr><td><u>08/05/04</u></td><td><u>Lunch - \$13.52</u></td></tr><tr><td><u>09/27/04</u></td><td><u>Lunch \$26.00</u></td></tr><tr><td><u>11/05/04</u></td><td><u>Lunch \$15.50</u></td></tr><tr><td><u>11/30/04</u></td><td><u>Omaha Steaks - \$60.00</u></td></tr></table> <p>12.b. Amount. <u>\$105.02</u></p>	<u>08/05/04</u>	<u>Lunch - \$13.52</u>	<u>09/27/04</u>	<u>Lunch \$26.00</u>	<u>11/05/04</u>	<u>Lunch \$15.50</u>	<u>11/30/04</u>	<u>Omaha Steaks - \$60.00</u>
<u>08/05/04</u>	<u>Lunch - \$13.52</u>								
<u>09/27/04</u>	<u>Lunch \$26.00</u>								
<u>11/05/04</u>	<u>Lunch \$15.50</u>								
<u>11/30/04</u>	<u>Omaha Steaks - \$60.00</u>								

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name _____</p> <p>Trade Name, if any: _____</p> <p>P.O. Box, Bldg., Room No., if any _____</p> <p>Street _____</p> <p>City _____</p> <p>State _____ ZIP Code + 4 _____</p> <p>13.b. Is the Business an Employer <input type="checkbox"/> or Consultant <input type="checkbox"/> ?</p>	<p>14.a. Nature of payment.</p> <p style="height: 150px; border: 1px solid black;"></p> <p>14.b. Amount of payment. _____</p>
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Name of Person Filing

Juan Campos

File Number U- 043-508

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name *Teamster Local 705 H&W Funds*Trade Name, if any: P.O. Box, Bldg., Room No., if any *7th*Street *1645 W JACKSON*City *Chicago*State *IL* ZIP Code + 4 *60612*

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☒ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name *Teamster Local 705 H&W Fund -*Trade Name, if any: P.O. Box, Bldg., Room No., if any *7th*Street *1645 W JACKSON*City *Chicago*State *IL* ZIP Code + 4 *60612*

11.a. Nature of such dealing.

*Trustee*11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

*see attach statement*12.b. Amount. *6,641.15*

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?14.b. Amount of payment.